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Norbert Gruenfeld
Type or print name

Norbert Gruenfeld
Signature

August 8, 2000
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

Art Unit: 1611

PAIVI JANNA KUKKOLA

APPLICATION NO: 09/533,219

FILED: MARCH 23, 2000

FOR: THYROMIMETIC ORGANIC COMPOUNDS

Assistant Commissioner for Patents
Washington, D.C. 20231

LETTER CORRECTING OFFICIAL FILING RECEIPT

Sir:

The official filing receipt received in the above-identified application erroneously lists Continuing Data as Claimed by Applicant. Please issue a corrected filing receipt as follows:

Under "Continuing Data as Claimed by Applicant"

-- Provisional Application No. 60/183,030 03/29/1999 --

In reviewing the filing receipt, it was noted that the Continuing Data as Claimed by Applicant which should have listed the provisional application number and filing date was omitted.

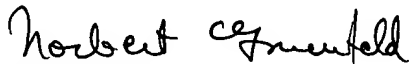
Provisional application number 60/183,030 was assigned to application No. 09/280,105, now converted to a provisional application. The benefit thereof is claimed in the Declaration by Applicant under 35 USC 119(e).

A copy of the filing receipt with the correction noted is enclosed.

Applicant believes this error is ascribable to the Patent Office. Accordingly, no fees are required. However, if this is incorrect, the Commissioner is hereby authorized to charge the \$25 fee under 37 CFR §1.19(h) and any additional fees that may be required to Deposit Account No. 19-0134 in the name of Novartis Corporation.

Respectfully submitted,

Novartis Corporation
Patent and Trademark Dept.
564 Morris Avenue
Summit, NJ 07901-1027
(908) 522-6926
Date: August 7, 2000



Norbert Gruenfeld
Agent for Applicant
Reg. No. 30,061

FILING RECEIPT



OC00000005113980

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTY. DOCKET NO | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|-------------|--------------|---------------|-----------------|----------|------------|------------|
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60/183,030 ✓

03/29/1999 ✓

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CGC2114

4-30879/PI/PROV/CGC2114

1095
THOMAS HOXIE
NOVARTIS CORPORATION
PATENT AND TRADEMARK DEPT
564 MORRIS AVENUE
SUMMIT, NJ 079011027



Date Mailed: 05/12/2000

Receipt is acknowledged of this provisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

PAIVI JANNA KUKKOLA, WHITEHOUSE STATION, NJ ; ✓

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 04/16/1999

-

Title

THYROMIMETIC AGENTS ✓

Preliminary Class

Data entry by : LITTLE, KEVIN

Team : OIPE

Date: 05/12/2000



LICENSE FOR FOREIGN FILING UNDER
Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15

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Bib Data Sheet

CONFIRMATION NO. 1152

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------|
| SERIAL NUMBER 09/533,219 | FILING DATE 03/23/2000 RULE | CLASS 540 | GROUP ART UNIT 1624 | ATTORNEY DOCKET NO. |
|------------------------------------|---|---------------------|-------------------------------|--------------------------------|

APPLICANTS

Paivi Jaana Kukkola, Whitehouse Station, NJ;

**** CONTINUING DATA *******

THIS APPLN CLAIMS BENEFIT OF 60/183,030 03/29/1999 ABN

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 05/31/2000**

| | | | | |
|--|-----------------------------------|---------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY NJ | SHEETS DRAWING | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 2 |
| 25 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

001095

TITLE

Thyromimetic organic compounds

| | | |
|---------------------------------------|---|---|
| FILING FEE RECEIVED 690 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
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| APPLICANTS Paivi Jaana Kukkola, Whitehouse Station, NJ; | | | | | |
| ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/183,030 03/29/1999 ABN | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>None / not</i> | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/31/2000 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> Allowance Examiner's Signature Initials | | STATE OR COUNTRY NJ | SHEETS DRAWING | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 2 |
| ADDRESS 001095 | | | | | |
| TITLE Thyromimetic organic compounds | | | | | |
| FILING FEE RECEIVED 690 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |